

A. Item Currently Budgeted -

Account Name No Financial Impact

Account Number _____

	Fund	Function	Object	Cost Center	Project	Sub Project
Original Approved Budget	Budget Amendments	Expenditures / Encumbrances To Date	Current Available Budget	Present Request	Remaining Balance Available	
+	-	=	-	=		
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	

Account Name _____

Account Number _____

	Fund	Function	Object	Cost Center	Project	Sub Project
Original Approved Budget	Budget Amendments	Expenditures / Encumbrances To Date	Current Available Budget	Present Request	Remaining Balance Available	
+	-	=	-	=		
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	

B. Item Currently Not Budgeted -**

Funding Source _____

Account Name _____

Account Number _____

	Fund	Function	Object	Cost Center	Project	Sub Project
Amount \$ _____						

Funding Source _____

Account Name _____

Account Number _____

	Fund	Function	Object	Cost Center	Project	Sub Project
Amount \$ _____						

C. History

Check one:
 Prior Year Budget:
 New for Current Year:

Prior Year Approved Budget: _____
 Prior Year Actual Spent: _____

**** WHEN ITEM NOT CURRENTLY BUDGETED IS APPROVED BY THE SCHOOL BOARD, THIS WILL SERVE AS THE BUDGET AMENDMENT****